



3754

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PTO/SB/21 (08-00)

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

| | | | |
|--|---|------------------------|----------------------|
| | | Application Number | 682225 |
| | | Filing Date | Aug 8, 2001 |
| | | First Named Inventor | McBride, Dale R. |
| | | Group Art Unit | 3754 |
| | | Examiner Name | Stephanie L. Willatt |
| Total Number of Pages in This Submission | 2 | Attorney Docket Number | 2007 |

ENCLOSURES (check all that apply)

| | | |
|---|---|---|
| <input type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Assignment Papers (for an Application) | <input type="checkbox"/> After Allowance Communication to Group |
| <input type="checkbox"/> Fee Attached | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input checked="" type="checkbox"/> Amendment / Reply | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Other Enclosure(s) (please identify below): |
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| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> Request for Refund | |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> CD, Number of CD(s) _____ | |
| <input type="checkbox"/> Response to Missing Parts/ Incomplete Application | | |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |
| Remarks | | |

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | |
|-------------------------------|-------------------|
| Firm or Individual name | Monika J. Hussell |
| Signature | |
| Date | December 24, 2002 |

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on this date:

December 24, 2002

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| Type or printed name | Monika J. Hussell |
| Signature | |
| Date | December 24, 2002 |

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

DEC 3 0 2002

CG
1/8/03

Applicant(s): McBride

Application No.: 0%
682225

Filed: 8/8/2001

Title: TRANSPORTABLE STORAGE WITH AN AUTONOMOUS DISPENSING SYSTEM

Attorney Docket No.: 2007

Assistant Commissioner for Patents
Washington, D.C. 20231

Group Art Unit:
3754

Examiner:
Stephanie L. Willatt

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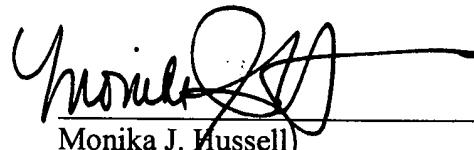
RESPONSE

Dear Sir:

In response to the Office Action of October 18, 2002, the applicant elects for purposes of examination only to proceed with the storage system claimed in claims 1-15 and 20-24. Applicant has made a diligent effort to place these claims in condition for allowance. However, should there remain unresolved issues that require adverse action, it is respectfully requested that the Examiner telephone Monika J. Hussell, Applicant's Attorney, at (304) 340-1197 so that such issues may be resolved as expeditiously as possible.

For these reasons, and in view of the above amendments, this application is now considered to be in condition for allowance and such action is earnestly solicited.

Respectfully Submitted,


Monika J. Hussell
Attorney for Applicant
Reg. No. 37359

December 24, 2002

Date

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